

ATTORNEY DOCKET NO. 08146.0001U1  
PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of )  
)  
HALLER ) Art Unit: 3632  
)  
Application No.: 10/812,833 ) Examiner: Wujciak, Alfred J.  
)  
Filing Date: March 30, 2004 ) Confirmation No.: 3114  
)  
For: DEVICE AND METHOD FOR )  
SPRINGING A VEHICLE SEAT )

TRANSMITTAL LETTER

Mail Stop AMENDMENT  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Ballard Spahr Andrews & Ingersoll, LLP  
Customer Number 23859

November 26, 2008

Sir:

Transmitted herewith is the following in the above-identified application:

<input checked="" type="checkbox"/>	Response to Office Action	<input checked="" type="checkbox"/>	Petition to Extend Time
<input checked="" type="checkbox"/>	Fee as calculated below	<input type="checkbox"/>	Supplemental Declaration
<input type="checkbox"/>	No Additional Fee Required	<input type="checkbox"/>	Terminal Disclaimer
<input type="checkbox"/>	Corrected Drawings	<input type="checkbox"/>	Other _____

CLAIMS AS AMENDED							
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE		ADDITIONAL FEE	
Total Claims			0	X \$52.00		\$0.00	
Independent Claims			0	X \$220.00		\$0.00	
<input type="checkbox"/> First Presentation of a Multiple Dependent Claim				+ \$390.00		\$0.00	
EXTENSION FEE	1 <sup>st</sup> Month \$130 <input checked="" type="checkbox"/>	2 <sup>nd</sup> Month \$490 <input type="checkbox"/>	3 <sup>rd</sup> Month \$1110 <input type="checkbox"/>	4 <sup>th</sup> Month \$1730 <input type="checkbox"/>	5 <sup>th</sup> Month \$2350 <input type="checkbox"/>		\$130.00
<input type="checkbox"/> Reduction by ½ for filing by SMALL ENTITY (Note 37 C.F.R. §1.9, §1.27, §1.28) -							- \$0.00
TOTAL FEE DUE							\$130.00

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APPLICATION NO. 10/812,833

Payment:

- ☐ A check in the amount of \$\_\_\_\_\_ is enclosed.
- ☒ Payment by credit card in the amount of \$130.00 for the fees designated below is submitted herewith.
- ☐ The Commissioner is authorized to charge our Deposit Account No. 14-0629 in the amount of \$\_\_\_\_\_ to cover the above-listed additional fees. A duplicate copy of this transmittal is enclosed.
- ☒ In the event of an overpayment or improper payment of a required fee, the Commissioner is authorized to charge or credit our Deposit Account No. 14-0629 as required to correct the error.

Respectfully submitted,

\_\_\_\_\_/Sumner C. Rosenberg/  
Sumner C. Rosenberg  
Registration No. 28,753

Ballard Spahr Andrews & Ingersoll, LLP  
Customer Number 23859  
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